

# STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15)

### RECEIVED

JUL 1 6 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

#### PLEASE PRINT

I. Name of Lobby	rist(s) Debra Van	derbeek, Rob	ert Clegg, Peri	klis Karoutas, Leann M	Moccia, Chris Herr
II. Name of lobby	vist's partnership,	firm or corp	oration, if any:		
•	Legislative So	utions, L.L.C.	•		
	(Name of partnership			-	
	P.O. Box 10724		Bedford	NH	03110
Business Address:	(Street)	(	Town/City)	(State)	(Zip Code)
( ) 603-986-9	9145	( )		e-mail dbeek(	@aol.com
(Telephor	ne)	_ `	(Fax)		
reportable expens	se transactions wl	nich are not a	ttributable to a		may file a separate report for
		elabrator Te		reporting date relative t	o the following chem.
				rist Registration Form)	<del></del>
<u>OR</u>	•				
☐ All reportable t unrelated to any pa		lobbyist (inclu	uding the lobbyi	st's family), or the lobby	ying firm listed below which are
IV. Date of Reports cover:	rt April 25, 20 activity from date of		3/31/18 d	July 25, 2018 X activity from 4/1/18 to 6/30	V18
	October 31, activity from 7/			January 30, 2019 [ activity from 10/1/18 to 12	
	ed, complete just t		•	ansactions made sinc ecretary of State's Offic	e the last report.   Graph of
yl. Check if addi					
				Addendum A– Fees and	
☐ If you have pa Expense Reimburs		or reimbursed	expenses, you n	nust file Addendum B-	Report of Honorariums or
☐ If you, your fi	rm, or your family	has made poli	tical contributio	ns, you must file Adder	ndum C– Political Contributions
Sworn Statement. I have read RSA 1 and complete to th	5 <u>, RSA</u> 15-B, RSA	14-C-and RS		oy swear or affirm that t July 19, 2018	he foregoing information is true
(Signature of lobb	yist				Date)
Debra Vanderbe	ek				
(Print Name of lo		-	_		

# LEASE PRINT

#### STATE OF NEW HAMPSHIRE



# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Debra Vanderbeek, Robert Clegg, Periklis Karout	as, Leann Moccia, Chris Herr
II. Name of lobbyist's partnership, firm or corporation, if any:	
Legislative Solutions, L.L.C.	
(Name of partnership, firm or corporation)	
III. Name of Client Wheelabrator Technologies	Date July 19, 2018
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$ 9750.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ <u>9750.00</u>
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>19,500.00</u>
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ <u>0</u>
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of the Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business st than \$10 that is given to the person of with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of a ter than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 9750.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ <u>0</u>
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ <u>0</u>

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ <u>9750.00</u>
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ <u>9750.00</u>
f) Total of all expenses year to date	f) \$ <u>19,500.00</u>
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	bbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my-knowledge and belief.	that the foregoing information
(Signature of lobbyist)	July 19, 2018 (Date)
Debra Vanderbeek	(2414)
(Print Name of lobbyist)	

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Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

# RECEIVED JUL 1 6 2018 NEW HAMPSHIRE DEPARTMENT OF STATE

Name of Lobbying part	nership, firm, or corpo	oration: Legislative S	Solutions, L.L.C.
Name of Client (leave b	olank if Statement is fo	or the partnership, firm, or	corporation and not related to any
particular client):	Wheelabra	ator Technologies	
Date of Report (check	one):		
April 25, 2018 □	July 25, 2018 D	October 31, 2018 🗆	January 30, 2019 □
. I have read RSA 15, R	SA 15-B, RSA 664, tl	he Statement of Income a	nd Expenses described above, and
the following Addendu submitted):	ms submitted with the	at Statement (insert the n	umber of Addendum forms being
Addendum A(s	).		
Addendum B(s)	).		
Addendum C(s)	).		
I hereby swear or affirm complete to the best of			nt and each Addendum is true and
John C	9/	July :	19, 2018
(Signature of lobbyist)	08		(Date)
Robert Clegg			
(Print Name of lobbyist	 )		

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Name of Lobbying partr	ership, firm, or corpo	ration: Legislative	Solutions, L.L.C.
Name of Client (leave b	lank if Statement is fo	or the partnership, firm, o	r corporation and not related to any
particular client):	Wheelabrator Technologies		
Date of Report (check o	ne):		
April 25, 2018 □	July 25, 2018	October 31, 2018 🗆	January 30, 2019 □
			and Expenses described above, and number of Addendum forms being
Addendum A(s)			
Addendum B(s)			
Addendum C(s)			
I hereby swear or affirm complete to the best of respectively.  (Signature of lobbyist)		ief.	ent and each Addendum is true and  19, 2018  (Date)
			,
Periklis Karoutas			
(Print Name of lobbyist)	•		

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

JUL 1 6 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

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Date of Report (check o	one):		
April 25, 2018 □	July 25, 2018	October 31, 2018 🗆	January 30, 2019 □
			nd Expenses described above, and umber of Addendum forms being
Addendum A(s)			
Addendum B(s)			
Addendum C(s)			
I hereby swear or affirm complete to the best of the b		ief.	nt and each Addendum is true and  19, 2018  (Date)
(4.8			(3.33)
Leann Moccia			f
(Print Name of lobbyist	)		

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

# JUL 1 6 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

Name of Lobbying pa	rtnership, firm, or corpo	oration: Legislative S	solutions, L.L.C.
· ·			corporation and not related to an
particular client):	Wheelabra	ator lechnologies	<del></del>
Date of Report (check	k one):		
April 25, 2018 □	July 25, 2018	October 31, 2018 🗆	January 30, 2019 □
			nd Expenses described above, and umber of Addendum forms being
Addendum A	(s).		
Addendum B(	(s).		
Addendum C(	(s).		
	f my knowledge and be	lief.	nt and each Addendum is true and 19, 2018 (Date)
Chalanta a			
Chris Herr			
(Print Name of lobbyi	st)		